

Michael T. Flynn

Defendant's name

**YOU ARE RELEASED ON THE FOLLOWING ADDITIONAL CONDITIONS INDICATED BELOW:**

**PERSONAL PROMISE**



**PERSONAL RECOGNIZANCE.** Your personal recognizance, provided that you promise to appear at all scheduled hearings, trials, or otherwise as required by the Court.

**UNSECURED APPEARANCE BOND.** Your personal unsecured appearance bond, to be forfeited should you fail to appear as required by the Court.

**CASH BOND.** Upon execution of appearance bond, to be forfeited should you fail to appear as required by the Court, secured by a deposit, such deposit to be returned when the Court determines you have performed the conditions of your release. You will deposit in the registry of the Court \_\_\_\_\_ %.

**SURETY BOND.** Upon execution of appearance bond with approved surety.

**YOU ARE HEREBY RELEASED ON THE CONDITIONS INDICATED BELOW:**

☐ 1)

**SUPERVISORY CUSTODY**

You hereby agree to be placed in the custody of \_\_\_\_\_ who agrees (a), to supervise you in accordance with the conditions below, (b), to use every effort to assure your appearance at all scheduled hearings, trials, or otherwise, and (c), to notify the D.C. Pretrial Services Agency immediately in the event you violate any condition of release or disappear. Agency telephone 442-1000

Custodian's name

Custodian's address

SIGNATURE OF CUSTODIAN

Custodian's phone no.

☒ 2)

**YOU ARE TO REPORT**



weekly



other-specify \_\_\_\_\_



in person



by phone

TO



THE D.C. PRETRIAL SERVICES AGENCY AT 442-1000.



Your attorney, whose name and address is shown below.

☒ 3)

**YOU ARE TO LIVE**



at \_\_\_\_\_

address

phone no



with \_\_\_\_\_

name and relationship to defendant

phone no.



at \_\_\_\_\_

address

phone no

being in at night by \_\_\_\_\_ P.M.

time

☐ 4a)

**YOU ARE TO WORK**



by obtaining a job within \_\_\_\_\_ days and reporting it to the D.C. Pretrial Services Agency at 442-1000.



by maintaining your job as \_\_\_\_\_

Employer's name and address



by enrolling in school at \_\_\_\_\_

name and address

☐ 4b)

**YOU ARE TO STUDY**



by maintaining your student status at \_\_\_\_\_

name and address

☐ 5)

**YOU ARE TO STAY**



away from the complaining witness.



Within the D.C. area.

☐ 6)

**NARCOTICS**

☐ 7)

**OTHER CONDITION**

☐ 8)

**REARREST**

Any rearrest on probable cause for any subsequent offense may result in revoking your present bond and setting it at \_\_\_\_\_

You are instructed that any violation of a condition of release may result in revocation of release, pretrial detention or contempt. If you willfully fail to appear as required, you will be subject to prosecution and if convicted, the maximum penalties are indicated on the reverse side. Furthermore, your release is subject to the terms and conditions contained on the reverse side which are incorporated in and made a part of this order, which by your signature below you certify you have read and understand.

**NEXT DUE BACK**

in Courtroom \_\_\_\_\_

or when notified and you must appear at all subsequent continued dates. You must also appear \_\_\_\_\_

**YOUR ATTORNEY**

Robert Keltner / Stephen Anthony  
Covington & Burling  
1201 Pennsylvania Ave, NW  
WDC 20004  
name (202) 662-5503  
address phone no.

**DEFENDANT'S SIGNATURE**



**WITNESSED BY**

PSA  
(title and agency)

I understand the penalties which may be imposed on me for willful failure to appear or for violation of any condition of release and agree to comply with the conditions of my release and to appear as required.

**IMPORTANT:** YOU ARE TO NOTIFY IMMEDIATELY THE D.C. PRETRIAL SERVICES AGENCY, 500 INDIANA AVE., N.W., FIRST FLOOR, TELEPHONE NUMBER 442-1000, OF ANY CHANGE OF ADDRESS, EMPLOYMENT, OR CHANGE IN STATUS OF ANY RELEASE CONDITIONS.

WHITE - TO COURT PAPERS  
BLUE - TO JUDGE  
GREEN - TO D.C. PRETRIAL SERVICES AGENCY  
CANARY - TO DEFENSE ATTORNEY  
PINK - TO U.S. ATTORNEY  
GOLDENROD - TO DEFENDANT

Date

12/1/2017

**SO ORDERED**

Signature of Judge